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AUG 2 0 2007

PTO/SB/17 (07-07)
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U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007				Complete If Known						
				Application Number 10/2		10/717,805	0/717,805			
				Filing Date Nov		November 20, 2	lovember 20, 2003			
				First Named Inventor		Parrini				
				Examiner Name		S. Kruer				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3654		· · · · · · · · · · · · · · · · · · ·				
TOTAL AMOUNT OF PAYMENT (\$) 910.00						16615				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 50-3156 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
C of the control of t										
Character and additional fools or under a great of fools										
Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
information and authorization	on PTO-203	ecome public B	. Credit card in	ormation should n	ot be inc	luded on this form.	Provide credit card			
FEE CALCULATION										
1. BASIC FILING, SEA	RCH, AND	EXAMINAT	TON FEES			1.111.1				
	FILING			CH FEES	EXA	MINATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity 1 Fee (\$)	Fee	Small Entity (\$) Fee (\$)	Fees Paid (\$)			
Utility	300	150	500	250	20	100				
Design	200	100	100	50	13	65				
Plant	200	100	300	150	16	80				
Reissue	300	. 150	500	250	600	300				
Provisional	200	100	0	0	(), 0				
2. EXCESS CLAIM FEES Small Entit										
<u>Fee Description</u> Each claim over 20 (<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25					
Each independent claim over 3 (including Reissues)						200	. 100			
Multiple dependent o	•	•		360	180					
				Pald (\$)		Multiple	Dependent Claims			
- 20 or HP =	l daims paid 6	X	=			<u>Fee (\$)</u>	Fee Paid (\$)			
HP = highest number of total claims paid for, if greater than 20. Indep. Claims						***************************************	-			
HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE	3. APPLICATION SIZE FEE									
listings under 37 C	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
4. OTHER FEE(S) Non-English Specific	Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination, one month extension of time							910.00			

SUBMITTED BY				7
Signature	Willam H Mine	Registration No. 26,855	Telephone 248-960-2100	
Name (Print/Type)	William J. Clepters		Date August 18, 2007	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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